

COCHISE HEALTH SYSTEMS

Financial Statements

and

Supplemental Information

June 30, 2009

CONTENTS

	<u>Page</u>
Independent Auditors' Report	1
Financial Statements	
Statement of Net Assets – Enterprise Fund	2
Statement of Revenues, Expenses, and Changes in Net Assets – Enterprise Fund	3-5
Statement of Cash Flows – Enterprise Fund	6
Notes to Financial Statements	7-13
Supplemental Information	
Report #1 – Statement of Financial Position, Net Assets or Balance Sheet	14
Report #2 – Statement of Activities/Income Statements	15-16
Report #3 – Investments and Balance Sheet “Other Account” Details	17
Report #4 – Income Statement “Other Account” Details	18
Report #5 – Medical Claims Payable RBUCs.	19
Report #6 – Claims Lag Report for Prospective Period Only-IBNR	20
Report #7 – Utilization Data Report	21
Report #8 – FQHC Reasonable Cost Reimbursement	22-23
List of Plan Officers and Directors	24

Independent Auditors' Report

The Board of Supervisors of
Cochise County, Arizona

We have audited the accompanying financial statements of Cochise Health Systems (the Plan), a proprietary fund of Cochise County, Arizona, as of June 30, 2009, as listed in the table of contents. These financial statements are the responsibility of the Plan's management. Our responsibility is to express an opinion on these financial statements based on our audit.

We conducted our audit in accordance with U.S. generally accepted auditing standards. Those standards require that we plan and perform the audit to obtain reasonable assurance about whether the financial statements are free of material misstatement. An audit includes examining, on a test basis, evidence supporting the amounts and disclosures in the financial statements. An audit also includes assessing the accounting principles used and significant estimates made by management, as well as evaluating the overall financial statement presentation. We believe that our audit provides a reasonable basis for our opinion.

As discussed in Note 1, the financial statements present only Cochise Health Systems and do not purport to, and do not, present fairly the financial position of Cochise County, Arizona, as of June 30, 2009, and the changes in its financial position, or, where applicable, its cash flows for the year then ended in conformity with U.S. generally accepted accounting principles.

In our opinion, the financial statements referred to above present fairly, in all material respects, the financial position of Cochise Health Systems as of June 30, 2009, and the changes in its financial position and cash flows for the year then ended in conformity with U.S. generally accepted accounting principles.

Our audit was made for the purpose of forming an opinion on the basic financial statements of the Plan taken as a whole. The accompanying supplemental information is presented for purposes of additional analysis and is not a required part of the basic financial statements. Such information has been subjected to the auditing procedures applied in the audit of the basic financial statements and, in our opinion, is fairly stated, in all material respects, in relation to the basic financial statements taken as a whole.

Fester & Chapman P.C.

October 13, 2009

Cochise Health Systems

STATEMENT OF NET ASSETS
ENTERPRISE FUND

June 30, 2009

ASSETS

Current assets:

Cash and cash equivalents	\$ 10,927,701
Capitation receivable from AHCCCS	168,206
Reinsurance receivable	<u>1,783,453</u>
Total current assets	12,879,360

Noncurrent assets:

Capital assets:

Furniture, equipment and vehicles	626,857
Accumulated depreciation	<u>(113,717)</u>
	<u>513,140</u>

Total assets	<u>13,392,500</u>
--------------	-------------------

LIABILITIES AND EQUITY

Current liabilities:

AHCCCS member care liabilities	3,387,460
Accounts payable	141,806
Accrued payroll and related expenses	128,008
Capitation and reconciliations payable	<u>100,746</u>
Total current liabilities	3,758,020

Net assets

Invested in capital assets	513,140
Restricted for health care	1,862,000
Unrestricted	<u>7,259,340</u>
Total net assets	<u>\$ 9,634,480</u>

The accompanying notes are an integral part of this statement.

Cochise Health Systems

STATEMENT OF REVENUES, EXPENSES, AND CHANGES IN NET ASSETS
ENTERPRISE FUND

Year Ended June 30, 2009

Operating revenues:

Capitation and share of cost reconciliation	\$ 33,769,091
PPC capitation	307,015
Reinsurance	3,152,508
Patient contributions	5,252
Third party liability	5,832
Other	<u>8,284</u>
Total operating revenues	37,247,982

Operating expenses:

Acute care:

Hospitalization	1,250,448
Primary care physician	385,976
Outpatient facility	373,343
Referral physician services	435,220
Pharmacy	488,647
Lab and radiology	166,710
Transportation	896,100
Therapies	165,837
Emergency services	208,813
Durable medical equipment	500,621
Outpatient behavioral health	174,140
PPC acute care	(16,645)
Dental	32,113
Other acute care costs	<u>9,384</u>
Total acute care	<u>5,070,707</u>

Institutional care:

Nursing home ICF and bedholds	8,663,825
SNF Level I	5,031,446
SNF Level II	1,073,736
SNF Level III	804,194
Institutional care	450,348
PPC institutional expenses	<u>170,505</u>
Total institutional care	<u>16,194,054</u>

(Continued)

The accompanying notes are an integral part of this statement.

Cochise Health Systems

STATEMENT OF REVENUES, EXPENSES, AND CHANGES IN NET ASSETS
ENTERPRISE FUND

Year Ended June 30, 2009
(Continued)

Home and community based services:

Home health nurse	\$ 411,940
Personal care	26,283
Homemaker	108,458
Home delivered meals	148,934
Respite care	9,843
Attendant care	7,127,136
Assisted living in-home	900,264
Adult day care	14,116
Adult foster care	312,480
Environmental modifications	78,873
HCBS placement reconciliation	293,465
Assisted living center	792,628
PPC HCBS	<u>1,064</u>
Total home and community based services	<u>10,225,484</u>

Case management:

Case management payroll and payroll related	1,137,614
Case management, other	<u>24,184</u>
Total case management	<u>1,161,798</u>

Other medical expenses:

Ventilator dependent	<u>240,028</u>
Total other medical expenses	<u>240,028</u>
Total medical expenses	<u>32,892,071</u>

(Continued)

The accompanying notes are an integral part of this statement.

Cochise Health Systems

STATEMENT OF REVENUES, EXPENSES, AND CHANGES IN NET ASSETS
ENTERPRISE FUND

Year Ended June 30, 2009
(Continued)

Administration expenses:	
Administrative payroll and payroll related	\$ 1,471,973
Data processing	320,107
Professional fees	45,775
Occupancy	37,634
Other	612,090
Depreciation	<u>17,625</u>
Total administration expenses	<u>2,505,204</u>
Total operating expenses	<u>35,397,275</u>
Operating income	1,850,707
Nonoperating revenues (expenses)	
Interest income	291,088
Premium tax	<u>(712,952)</u>
Total nonoperating revenues (expenses), net	<u>(421,864)</u>
Income before transfers	1,428,843
Transfers to Cochise County	<u>(360,201)</u>
Increase in net assets	1,068,642
Total net assets, July 1, 2008	<u>8,565,838</u>
Total net assets, June 30, 2009	<u>\$ 9,634,480</u>

The accompanying notes are an integral part of this statement.

Cochise Health Systems

STATEMENT OF CASH FLOWS
ENTERPRISE FUND

Year Ended June 30, 2009

Cash flows from operating activities:	
Cash received from:	
Contractors, patients, and other payors	\$ 36,556,098
Miscellaneous operations	19,368
Cash payments to:	
Providers for health care services	(32,128,742)
Suppliers for goods and services	(999,489)
Employees for services	<u>(2,692,863)</u>
Net cash provided by operating activities	754,372
Cash flows from noncapital financing activities:	
Cash transfers to other Cochise County funds	(360,201)
Premium tax payments	<u>(712,952)</u>
Net cash used for noncapital financing activities	(1,073,153)
Cash flows from capital financing activities:	
Purchase of furniture, equipment and vehicles	<u>(148,644)</u>
Net cash used for capital financing activities	(148,644)
Cash flows from investing activities:	
Interest received on cash and cash equivalents	<u>291,088</u>
Net cash provided by investing activities	<u>291,088</u>
Net decrease in cash and cash equivalents	(176,337)
Cash and cash equivalents at July 1, 2008	<u>11,104,038</u>
Cash and cash equivalents at June 30, 2009	<u>\$ 10,927,701</u>
Reconciliation of operating income to net cash provided by operating activities:	
Operating income	\$ 1,850,707
Adjustments to reconcile net income to net cash provided by operating activities:	
Depreciation	17,625
Amortization of prepaid rent	25,000
Changes in assets and liabilities:	
Reinsurance receivable	(728,753)
Receivable from AHCCCS	(147,397)
Other receivables	102,888
AHCCCS member care liabilities	(374,285)
Capitation and reconciliations payable to AHCCCS	100,746
Accounts payable and accrued administrative expenses	<u>(92,159)</u>
Total adjustments	<u>(1,096,335)</u>
Net cash provided by operating activities	<u>\$ 754,372</u>
Supplemental disclosure:	
Interest paid	none

The accompanying notes are an integral part of this statement.

Cochise Health Systems

NOTES TO FINANCIAL STATEMENTS

June 30, 2009

NOTE 1 - GENERAL PLAN DESCRIPTION

The financial statements presented are for Cochise Health Systems (the Plan), which is a division of Cochise County Department of Aging and Social Services. No other County operations are included in these financial statements. The Plan is party to an Arizona Long-Term Care System (ALTCS) contract for Cochise County residents that was awarded to Cochise County on November 1, 1993, and the Graham and Greenlee Counties' ALTCS contracts that were awarded to Cochise County on December 13, 1999, and October 1, 2001, respectively. These contracts are administered under the auspices of the Arizona Health Care Cost Containment System (AHCCCS). The Plan provides acute medical care, long-term institutional care, and home and community based services for physically disabled and elderly persons who are AHCCCS members and are at risk of institutionalization.

NOTE 2 - SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

Description of Fund

A Fund is described as an independent fiscal and accounting entity with a self-balancing set of accounts used to record assets, related liabilities, reserves and equities which are segregated for the purpose of carrying on activities of the reporting entity.

Proprietary (Enterprise) Fund

This fund type is used to account for operations that are financed and operated in a manner similar to private business enterprises, in which the intent is that the costs (expenses, including depreciation) of providing goods or services to the general public on a continuing basis be financed or recovered primarily through user charges.

Basis of Accounting

The financial statements were prepared using the accrual basis of accounting, following accounting principles U.S. generally accepted accounting principles as they apply to enterprise funds of state and local governments, and following the reporting guidelines as established by AHCCCS.

Cochise Health Systems

NOTES TO FINANCIAL STATEMENTS - CONTINUED

June 30, 2009

NOTE 2 - SUMMARY OF SIGNIFICANT ACCOUNTANT POLICIES – CONTINUED

Pronouncements of GASB and FASB

Government Accounting Standards Board (GASB) Statement No. 20 states that Financial Accounting Standards Board (FASB) and its predecessor body pronouncements issued before November 30, 1989, continue to be applicable to Enterprise Funds unless they conflict with or contradict GASB guidance.

Enterprise Funds may take either of the following approaches to FASB guidance issued subsequent to November 30, 1989.

1. An entity may elect to continue to follow FASB guidance that does not conflict with or contradict GASB guidance. If this election is made, it must be followed consistently. It would not be appropriate to follow some FASB pronouncements issued subsequent to the cutoff date, but not others.
2. An entity may elect not to subject itself to FASB guidance issued subsequent to the cutoff date. In that case, even FASB amendments of guidance issued prior to the cutoff date would not be applicable to proprietary operations.

The Plan has elected to subject itself to FASB guidance issued subsequent to November 30, 1989.

Use of Estimates

In preparing financial statements in conformity with generally accepted accounting principles, management is required to make estimates and assumptions that affect the reported amounts of assets and liabilities, the disclosure of contingent assets and liabilities at the date of the financial statements, and the reported amounts of revenues and expenses during the reporting period. Actual results could differ from those estimates.

Cash and Cash Equivalents

For purposes of the statement of cash flows, the Plan considers all highly liquid investments with a maturity of three months or less when purchased to be cash equivalents. All of the Plan's monies are under the direct supervision of the Cochise County Treasurer's Office and were fully collateralized or invested in the Arizona State Treasurer's Local Government Investment Pool (LGIP).

Cochise Health Systems

NOTES TO FINANCIAL STATEMENTS - CONTINUED

June 30, 2009

NOTE 2 - SUMMARY OF SIGNIFICANT ACCOUNTANT POLICIES - CONTINUED

Revenue Recognition

a. Capitation Revenue

The Plan receives capitation payments under the AHCCCS contract based on member months equivalents. At the beginning of each month, the Plan receives capitation based on the number of members enrolled for that month. As members are added or removed from enrollment, capitation is adjusted for the remaining portion of the month. At any given time, capitation may be due to or due from AHCCCS. Capitation revenue is recognized in the month that members are entitled to long-term and acute health care services. The Plan is required to provide those services to its members, regardless of the cost of care provided.

b. Reinsurance Revenue

The Plan is entitled to receive reinsurance revenue from AHCCCS for a percentage of costs incurred for in-patient hospital care and certain other medical expenses in excess of a stated deductible per member per contract year.

c. Share of Cost Adjustment

Per the contract with AHCCCS, members with income in excess of standards set by AHCCCS are to pay a portion of their covered expenses. This is known as a Share of Cost (SOC). A portion of the Plan's capitation is based on assumed SOC per member per month. If actual assigned SOC is less than assumed SOC, AHCCCS has agreed to reimburse the Plan. If actual assigned SOC is greater than assumed SOC, the Plan has agreed to reimburse AHCCCS. The SOC adjustment is based on current assigned SOC information from AHCCCS.

Cochise Health Systems

NOTES TO FINANCIAL STATEMENTS - CONTINUED

June 30, 2009

NOTE 2 - SUMMARY OF SIGNIFICANT ACCOUNTANT POLICIES - CONTINUED

Furniture, Equipment and Vehicles

Furniture, equipment and vehicles in excess of \$5,000 are recorded at cost and depreciated using straight-line and accelerated methods over the estimated useful lives of the assets ranging from 3-7 years.

Income Taxes

The Plan is a division of a governmental entity, and as such does not pay income taxes. Therefore, no provision for income taxes has been made in these statements.

Medical Expenses

All medical expenses are reported net of Medicare payments.

NOTE 3 - BONDING MECHANISM

On September 20, 1993, the Cochise County Board of Supervisors adopted Resolution 93-99 pledging to provide financial backing as an ALTCS program contractor, in the event of a default by the Plan. On November 22, 1999, the Cochise County Board of Supervisors adopted Resolution 99-80 amending Resolution 93-99 to include the addition of Graham County in the Cochise County ALTCS program service area. Effective October 1, 2001 Resolution 01-61 was adopted by the Board of Supervisors amending the previous resolutions to include Greenlee County.

NOTE 4 - RETIREMENT PLAN

Plan Description

The Plan contributes to the Arizona State Retirement System (ASRS), which administers a cost-sharing multiple-employer defined benefit pension plan that covers general employees of Cochise County. The ASRS is governed by the Arizona State Retirement System Board according to the provisions of A.R.S. Title 38, Chapter 5, Article 2. Benefits are established by state statute and generally provide retirement, death, long-term disability, survivor, and health insurance premium benefits.

Cochise Health Systems

NOTES TO FINANCIAL STATEMENTS - CONTINUED

June 30, 2009

NOTE 4 - RETIREMENT PLAN-CONTINUED

The ASRS issues a publicly available financial report that includes its financial statements and required supplementary information. A report may be obtained by writing or calling:

ASRS

3300 N. Central Avenue
P.O. Box 33910
Phoenix, AZ 85067-3910
(602) 240-2000 or (800) 621-3778

Funding Policy

The Arizona State Legislature establishes and may amend active plan members' and the Plan's contribution rates.

For the ASRS fiscal year ended June 30, 2009, active ASRS members and the Plan were each required by statute to contribute at the actuarially determined rate of 9.45 percent (8.95 percent retirement and 0.5 percent long-term disability) of the members' annual covered payroll. The Plan's contributions to ASRS for the years ended June 30, 2009, 2008 and 2007 were \$175,615, \$185,160, and \$172,679, respectively, which was equal to the required contributions for each respective year.

NOTE 5 – CAPITAL ASSETS

Capital asset activity for the year ended June 30, 2009, was as follows:

	Beginning Balance	Increases	Decreases	Ending Balance
Furniture and equipment	\$ 374,293	\$ 122,993		\$ 497,186
Vehicles	131,584	28,077	\$ (29,760)	129,671
Less accumulated depreciation	<u>(123,426)</u>	<u>(17,625)</u>	<u>27,334</u>	<u>(113,717)</u>
Total capital assets, net	<u>\$ 382,121</u>	<u>\$ 133,445</u>	<u>\$ (2,426)</u>	<u>\$ 513,140</u>

Cochise Health Systems

NOTES TO FINANCIAL STATEMENTS - CONTINUED

June 30, 2009

NOTE 6 – CLAIMS PAYABLE

The Plan utilizes a computerized authorization system to aid in the determination of received but unpaid claims (RBUCs) and to prevent unauthorized services from being rendered. Providers are required to obtain authorization before services are rendered for most services provided. The Plan then uses historical analysis reports from their computer system to generate lag reports. These lag reports are used to estimate incurred but not reported claims (IBNRs). IBNRs are then added to RBUCs to determine claims payable. In addition, incentives of up to 2% of claims paid to institutional care providers can be earned and are accrued as claims payable.

Claims payable at June 30, 2009, consisted of the following:

Reported but unpaid claims	\$ 941,453
Institutional care incentives	40,000
Incurred but not reported claims	<u>2,406,007</u>
Total claims payable	<u>\$ 3,387,460</u>

NOTE 7 - RESTRICTED NET ASSETS

Per the contract with AHCCCS, the Plan is required to retain in equity an amount equal to \$2,000 per enrolled member at year-end. Restricted net assets totaled \$1,862,000 at June 30, 2009. The balance of any equity may be distributed after the issuance of the audited financial statements, with AHCCCS's permission. During the year ended June 30, 2009, the Plan transferred \$360,201 to Cochise County's general fund.

NOTE 8 - OTHER ADMINISTRATION

Following is a summary of other administration expenses for the year ended June 30, 2009:

Office supplies	\$ 29,218
Insurance	61,681
Minor equipment	16,965
Telephone	16,783
Travel and training	7,296
Dues and licenses	119
County overhead	428,824
Postage	17,914

Cochise Health Systems

NOTES TO FINANCIAL STATEMENTS - CONTINUED

June 30, 2009

NOTE 8 - OTHER ADMINISTRATION - CONTINUED

Printing	9,341
Equipment lease	20,262
Other	<u>3,687</u>
	<u>\$ 612,090</u>

NOTE 9 - RELATED PARTY TRANSACTIONS

The Plan occupies Cochise County office space, for which it incurred rent expense of \$25,000 for the year ended June 30, 2009. In addition, the Plan incurred administration fees from the County of \$428,824 for the year ended June 30, 2009. At June 30, 2009, the Plan owed the County \$112,465. The Plan's employees are employees of the County and are subject to all rules and regulations of Cochise County.

NOTE 10 - RECONCILIATIONS RECEIVABLE FROM/(PAYABLE TO) AHCCCS

The amounts due from/(to) AHCCCS at June 30, 2009, are as follows:

HCBS	\$ (102,285)
Share of Cost	21,539
PPC	<u>(20,000)</u>
Total	<u>\$(100,746)</u>

NOTE 11 – COMMITMENTS AND CONTINGENCIES

The Plan has entered into a contract with Plexis Healthcare Systems, Inc. for claims processing software and implementation. The total contract amount is \$465,300. The amount completed through June 30, 2009, was \$443,360 and the remaining contractual commitment totaled \$21,140.

SUPPLEMENTAL INFORMATION

Appendix 6.1.1

Program Contractor Financial Reporting Systems - Report #1 Statement of Financial Position, Net Assets or Balance Sheet

Program Contractor **Cochise Health Systems**

Quarter Ending 06/30/09

Fiscal Year Ending 09/30/09

Account #	Account Description	Balance
Current Assets:		
105	Cash and Cash Equivalents	10,907,701
110	Short-Term Investments (Report #3)	-
115	Capitation Receivable from AHCCCS	168,206
120	Reinsurance Receivable from AHCCCS:	1,783,453
125	Investment Income Receivable	-
130	Current Due from Affiliates	-
135	Other Current Receivables (Report #3)	21,539
140	Other Current Assets (Report #3)	20,000
Total Current Assets:		12,900,899
Other Assets:		
145	General Performance Bond (Report #3)	-
150	Restricted Cash and Other Assets	-
155	Long-Term Investments (Report #3)	-
160	Non-Current Due from Affiliates	-
165	Other Non-Current Assets (Report #3)	-
Total Other Assets		-
PROPERTY AND EQUIPMENT:		
170	Land	-
175	Buildings	-
180	Leasehold Improvements	-
185	Furniture & Equipment	497,186
190	Other Property & Equipment (Report #3)	129,671
195	Accumulated Depreciation & Amortization	(113,717)
Net Property & Equipment:		513,140
Total Assets:		13,414,039
Current Liabilities:		
205	Accounts Payable	141,806
210	Accrued Administrative Expenses	128,008
215	Capitation Payable	-
220	IBNR Medical Claims Payable (Report #7)	2,406,006
222	RBUCs Medical Claims Payable (Report #6)	941,453
225	Other Current Payables (Report #3)	122,285
230	Current Portion of Long-Term Debt (Report #3)	-
235	Current Due to Affiliates	-
240	Other Current Liabilities (Report #3)	40,000
Total Current Liabilities:		3,779,558
Other Liabilities:		
245	Non-Current Portion of Long-Term Debt (Report #3)	-
250	Non-Current Due to Affiliates	-
255	Other Non-Current Liabilities (Report #3)	-
Total Other Liabilities:		-
Total Liabilities:		3,779,558
Equity/Net Assets(Liabilities):		
505	Preferred Stock	-
510	Common Stock	-
515	Treasury Stock	-
520	Unrestricted Net Assets	-
525	Restricted Net Assets	-
527	Additional Paid-in Capital	-
528	Contributed Capital	-
530	Retained Earnings/Net Assets(Liabilities)	-
Net Equity/Net Assets(Liabilities):		9,634,481
Total Liability & Equity:		13,414,039

Account #	Account Description	CURRENT QUARTER				YEAR TO DATE							
		Dual Members Amount	Dual Members PMPM	Non-Dual Members Amount	Non-Dual Members PMPM	Total Amount	Total PMPM	Dual Members Amount	Dual Members PMPM	Non-Dual Members Amount	Non-Dual Members PMPM	Total Amount	Total PMPM
Revenues:													
300	Capitation	7,277,857	2,938	1,304,197	4,076	8,582,053	3,068	21,636,933	2,926	3,934,592	4,116	25,571,524	3,062
305	PPC Capitation	104,185	42	16,281	51	120,466	43	211,331	29	18,505	19	229,836	28
310	Reinsurance	420,287	170	54,296	170	474,583	170	1,463,494	198	189,185	198	1,652,689	198
315	PPC - Reconciliation	-	-	-	-	-	-	28,650	4	3,709	4	32,359	4
320	Share of Cost (SOC) Reconciliation *	(38,914)	(16)	(6,446)	(20)	(45,360)	(16)	72,576	10	(47,498)	(50)	25,078	3
325	HCBS Placement Reconciliation *	-	-	-	-	-	-	-	-	-	-	-	-
330	HIV/AIDS/Supplement	-	-	-	-	-	-	-	-	-	-	-	-
335	Other AHCCCS Revenue (Report #4)	21,185	9	2,737	9	23,922	9	71,106	10	1,982	2	73,088	9
	Subtotal AHCCCS Revenue	7,784,600	3,143	1,371,064	4,285	9,155,664	3,273	23,484,090	3,176	4,100,484	4,289	27,584,574	3,303
		-	-	-	-	-	-	-	-	-	-	-	-
350	Investment Income *	48,582	20	6,276	20	54,858	20	199,639	27	25,880	27	225,518	27
360	Third Party Liability Recoveries	5,165	2	667	2	5,832	2	5,167	1	665	1	5,832	1
370	Patient Contributions (MSOC)	1,892	1	244	1	2,136	1	3,804	1	492	1	4,296	1
380	Other Non-AHCCCS Income (Report #4)	1,795	1	232	1	2,027	1	5,475	1	708	1	6,183	1
	Subtotal Non-AHCCCS Revenue	57,433	23	7,420	23	64,853	23	214,085	29	27,744	29	241,829	29
	TOTAL REVENUES	7,842,033	3,166	1,378,484	4,308	9,220,517	3,297	23,698,175	3,205	4,128,228	4,318	27,826,403	3,332
Institutional Care Expenses:													
400	NF ICF & Bedholds	1,891,356	764	244,341	764	2,135,697	764	5,828,379	788	753,470	788	6,581,849	788
402	Level I	1,144,498	462	147,856	462	1,292,354	462	3,377,799	457	436,689	457	3,814,468	457
404	Level II	257,187	104	33,226	104	290,413	104	733,932	99	94,880	99	828,811	99
406	Level III	153,846	62	19,875	62	173,721	62	446,049	60	57,564	60	503,713	60
408	Institutional Care	105,862	43	13,676	43	119,538	43	290,532	39	37,559	39	328,091	39
410	PPC: Institutional	101,631	41	13,130	41	114,761	41	122,540	17	15,842	17	138,382	17
412	Other Institutional Care (Report #4)	-	-	-	-	-	-	-	-	-	-	-	-
	TOTAL INSTITUTIONAL CARE	3,654,380	1,475	472,103	1,475	4,126,483	1,475	10,799,231	1,460	1,396,083	1,460	12,195,314	1,460
Home & Community Based Services (HCBS) Expenses:													
414	Home Health Nurse	100,821	41	13,025	41	113,846	41	308,900	42	39,933	42	348,833	42
416	Home Health Aide	-	-	-	-	-	-	-	-	-	-	-	-
418	Personal Care	11,372	5	1,469	5	12,841	5	30,131	4	3,895	4	34,026	4
420	Homemaker	11,471	5	1,482	5	12,952	5	69,221	9	8,949	9	78,170	9
422	Home Delivered Meals	24,432	10	3,156	10	27,588	10	88,146	12	11,395	12	99,541	12
424	Respite Care	2,771	1	358	1	3,129	1	7,733	1	1,000	1	8,732	1
426	Attendant Care	1,176,267	475	151,960	475	1,328,227	475	4,822,992	652	623,498	652	5,446,489	652
428	Assisted Living Home	151,560	61	19,580	61	171,139	61	501,603	68	64,845	68	586,449	68
429	Assisted Living Center	79,598	32	10,283	32	89,882	32	494,723	67	63,956	67	558,679	67
430	Adult Day Health	-	-	-	-	-	-	11,112	2	1,437	2	12,549	2
432	Adult Foster Care	13,655	6	1,764	6	15,419	6	202,382	27	26,163	27	228,545	27
434	Group Respite	-	-	-	-	-	-	-	-	-	-	-	-
436	Hospice	-	-	-	-	-	-	-	-	-	-	-	-
438	Environmental Modifications	8,854	4	1,144	4	9,998	4	48,084	7	6,216	7	54,300	7
443	PPC HCBS	305	0	39	0	345	0	351	0	45	0	396	0
444	Other HCBS Costs (Report #4)	57,496	23	7,428	23	64,924	23	348,461	47	45,048	47	393,509	47
	TOTAL HCBS	1,638,601	662	211,688	662	1,850,289	662	6,933,839	938	896,380	938	7,830,219	938
Acute Care Expenses:													
448	Inpatient Services (Hosp.)	(80,767)	(33)	(10,434)	(33)	(91,201)	(33)	488,304	66	63,126	66	551,430	66
450	Primary Care Physician Services	74,016	30	9,562	30	83,578	30	282,032	38	36,460	38	318,492	38
452	Referral Physician Services	78,900	32	10,193	32	89,093	32	296,956	40	39,389	40	335,345	40
454	Emergency Services	47,873	19	6,185	19	54,058	19	165,347	22	21,375	22	186,723	22
456	Out Patient Facility	26,643	11	3,442	11	30,084	11	115,594	16	14,944	16	130,537	16
458	Prescription Drug	30,586	12	3,951	12	34,538	12	315,198	43	40,748	43	355,946	43
460	Lab/Radiology	33,142	13	4,282	13	37,423	13	111,526	15	14,418	15	125,944	15
462	Durable Medical Equipment	91,798	37	11,859	37	103,658	37	375,815	51	48,584	51	424,398	51
464	Dental (Report #4A)	11,259	5	1,455	5	12,714	5	12,933	2	1,672	2	14,805	2
466	Transportation	161,027	65	20,803	65	181,830	65	624,872	84	80,781	84	705,653	84
468	Therapies	21,364	9	2,760	9	24,124	9	88,412	12	11,430	12	99,842	12
470	Outpatient Behavioral Health	34,497	14	4,457	14	38,954	14	121,497	16	15,707	16	137,203	16
471	PPC Acute Care	6,788	3	877	3	7,664	3	7,369	1	953	1	8,321	1
472	Other Acute Care Costs (Report #4)	23,989	10	3,099	10	27,088	10	161,176	22	20,836	22	182,012	22
	TOTAL ACUTE CARE	561,115	227	72,489	227	633,605	227	3,167,030	428	409,421	428	3,576,452	428

Program Contractor Financial Reporting Systems - Report #2A Statement of Activities/Income Statement (GSA)

Program Contractorise Health Systems

Quarter Ending 06/30/09

Fiscal Year Ending 09/30/09

CURRENT QUARTER				YEAR TO DATE			
Account #	Account Description	Dual Members Amount	Dual Members PMPM	Non-Dual Members Amount	Non-Dual Members PMPM	Total Amount	Total PMPM
Other Medical Expenses:							
474	Ventilator Dependent	56,482	23	7,298	23	63,790	23
477	PPC - Other		-		-		-
479	Other Medical (Report #4)		-		-		-
TOTAL OTHER MEDICAL							
480	Case Management	241,845	98	31,244	98	273,089	98
TOTAL MEDICAL EXPENSE:		6,152,434	2,484	794,822	2,484	6,947,256	2,484
Administrative Expenses:*							
484	Compensation	315,721	127	40,787	127	356,508	127
488	Data Processing	31,951	13	4,128	13	36,079	13
490	Management Fees	-	-	-	-	-	-
492	Interest Expense	-	-	-	-	-	-
493	Occupancy	-	-	-	-	-	-
494	Marketing	11,051	4	1,428	4	12,478	4
495	Depreciation	9,089	4	1,174	4	10,263	4
496	Other Administration (Report #4)	170,647	69	22,046	69	192,692	69
TOTAL ADMINISTRATION		538,459	217	69,562	217	608,021	217
TOTAL EXPENSE		6,690,893	2,701	864,384	2,701	7,555,277	2,701
INCOME FROM OPERATIONS		1,151,140	465	514,100	1,607	1,665,240	595
497	Non-Operating Income (Loss)	-	-	-	-	-	-
INCOME(LOSS) BEFORE TAXES		1,151,140	465	514,100	1,607	1,665,240	595
498	Provision for Premium Taxes	146,623	59	18,866	59	165,488	59
499	Provision for Income Taxes	-	-	-	-	-	-
NET INCOME(LOSS) AFTER TAXES		1,004,517	406	495,234	1,548	1,499,751	536
CHANGES TO EQUITY/NET ASSETS:							
530	Equity/Net Assets at Beginning of Period	7,526,507	3,039	968,422	3,026	8,494,929	3,037
505	Preferred Stock		-		-		-
510	Common Stock		-		-		-
515	Treasury Stock		-		-		-
520	Unrestricted Net Assets		-		-		-
525	Restricted Net Assets		-		-		-
527	Increase(Decrease) in Add'l Paid-in Capital	(319,137)	(129)	(41,063)	(128)	(360,200)	(129)
528	Increase(Decrease) in Contributed Capital		-		-		-
530	Increase(Decrease) in R/E Fund Balance		-		-		-
	A. Net Income (Loss)	1,004,517	406	495,234	1,548	1,499,751	536
	B. Dividends to Stockholders		-		-		-
	C. Other, specify		-		-		-
530	Equity/Net Assets at End of Period:	8,536,150	3,446	1,088,331	3,432	9,634,481	3,445

Program Contractor Financial Reporting Systems - Report #3 Investments and Balance Sheet "Other Account" Details

Program Contractor Cochise Health Systems

Quarter Ending 06/30/09

Fiscal Year Ending 09/30/09

Investments

Investment Description	Category	Type	Amortized Cost	Market Value	Carrying Value
Account: 110 - Short-Term Investments					
		Bond/Note			
		Stock			\$ -
		Subtotal:	\$ -	\$ -	\$ -
Account: 145 - General Performance Bond					
		Bond/Note			\$ -
		Subtotal:	\$ -	\$ -	\$ -
Account: 155 - Long-Term Investments					
		Bond/Note			
		Stock			
		Mutual Fund			
		Subtotal:	\$ -	\$ -	\$ -
		Total:	\$ -	\$ -	\$ -

Other Assets

Account: #135 - Other Current Receivables		
SOC Reconciliation		\$ 21,539
	Subtotal:	\$ 21,539
Account: #140 - Other Current Assets		
	Subtotal:	\$ -
Account: #165 - Other Non - Current Assets		
ACH		\$ 20,000
	Subtotal:	\$ 20,000
Account: #190 - Other Property and Equipment		
Vehicles		\$ 129,671
	Subtotal:	\$ 129,671
	Total :	\$ 171,210

Other Liabilities

Account: #225 - Other Current Payables		
PPC Reconciliation		\$ 20,000
HCBS Reconciliation		\$ 102,285
	Subtotal:	\$ 122,285
Account: #240 - Other Current Liabilities		
Other Medical Liabilities Bonus Pool		\$ 40,000
	Subtotal:	\$ 40,000
Account: #255 - Other Non - Current Liabilities		
		\$ -
	Subtotal:	\$ -
	Total :	\$ 162,285

Long Term Debt

Account: #230 - Current Portion of Long Term Debt		
		\$ -
	Subtotal:	\$ -
Account: #245 - Non-Current Portion of Long Term Debt		
		\$ -
	Subtotal:	\$ -
	Total :	\$ -

Program Contractor Financial Reporting Systems - Report #4 Income Statement "Other Account" Details

Program Contractor Cochise Health Systems

Quarter Ending 06/30/09

Fiscal Year Ending 09/30/09

Other Revenue

Account: #335 - Other AHCCCS Revenue	
Vent Dependant Dual Cap. CC	\$ 9,094
Vent Dependant Dual Cap. GC	\$ 8,902
Acute Care Dual Cap. CC	\$ 2,948
Acute Care Dual Cap. GC	\$ 1,589
Acute Care Dual Cap. GL	\$ -
Acute Care Non Dual Cap. CC	\$ 793
Acute Care Non Dual Cap. GL	\$ 596
Subtotal	\$ 23,922
Account: #380 - Other Non-AHCCCS Revenue	
Group Health Trust	\$ 2,027
Subtotal:	\$ 2,027
Total :	\$ 25,948

Other Expenses

Account: #412 - Other Institutional Care Expense	
	\$ -
Subtotal:	\$ -
Account: #444 - Other HCBS Costs	
HCBS Reconciliation Dual CC	\$ 45,225
HCBS Reconciliation Dual GC	\$ (19,497)
HCBS Reconciliation Dual GL	\$ 1,045
HCBS Reconciliation Non Dual CC	\$ (3,223)
HCBS Reconciliation Non Dual GC	\$ (1,236)
HCBS Reconciliation Non Dual GL	\$ 5,116
Sheltered Employment/Habilitation CC	\$ 11,370
Adult Day Care GC	\$ 2,084
Adult Day Care CC	\$ -
DDD Group Home CC	\$ 24,038
Other CC	\$ -
Subtotal	\$ 64,924
Account: #472 - Other Acute Care Costs	
Dialysis CC	\$ 25,824
Dialysis GC	\$ -
Dialysis GL	\$ 1,264
Other Medical CC	\$ -
Subtotal:	\$ 27,088
Account: #479 - Other Medical Expense	
Subtotal:	\$ -
Account: #496 - Other Administrative Expense	
Office Supplies	\$ 7,180
Telephone	\$ 3,558
Postage	\$ 3,833
Printing	\$ 54
Equip lease	\$ 2,405
Dues & Licenses	\$ 52
Books Periodicals	\$ 1,475
Overhead	\$ 112,538
Admin other Medical	\$ -
Advertising	\$ -
Repairs and Maintenance	\$ 260
Travel	\$ 1,157
Minor Equipment	\$ 1,659
Other	\$ 58,522
Subtotal:	\$ 192,692
Total :	\$ 284,704

Program Contractor Financial Reporting Systems - Report 5 - Medical Claims Payable RBUCs

Program Contractor Cochise Health Systems

Quarter Ending 06/30/09

Fiscal Year Ending 09/30/09

ACCOUNT	1-30 DAYS	31-60 DAYS	61-90 DAYS	OVER 90 DAYS	TOTAL RBUCs
Institutional Care	\$ 505,117				\$ 505,117
HCBS	\$ 264,364				\$ 264,364
Acute Care	\$ 164,027				\$ 164,027
Other Medical	\$ 2,945				\$ 2,945
Total Prospective	\$ 936,453				\$ 936,453
Total Prior Period Coverage	\$ 5,000		-	-	\$ 5,000
TOTAL CLAIMS PAYABLE		-	-	-	\$ 941,453

Program Contractor **Cochise Health Systems**Quarter Ending **06/30/09**Fiscal Year Ending **09/30/09****A - INSTITUTIONAL PAYMENTS**

(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)
←-----QUARTER IN WHICH SERVICE PROVIDED----->									
LINE	QUARTER OF PAYMENT	CURRENT	1ST PRIOR	2ND PRIOR	3RD PRIOR	4TH PRIOR	5TH PRIOR	6TH PRIOR*	TOTAL
1	CURRENT	2,233,822	1,404,492	16,084	139	-	-	-	3,654,538
2	1ST PRIOR		2,461,429	1,424,412	15,106	-	-	-	3,900,947
3	2ND PRIOR			2,546,677	1,273,210	10,664	1,907	-	3,832,458
4	3RD PRIOR				2,442,726	1,349,315	62,018	14,933	3,868,992
5	4TH PRIOR					2,421,394	1,375,143	52,131	3,848,668
6	5TH PRIOR						2,495,633	1,497,052	3,992,685
7	6TH PRIOR							2,591,948	2,591,948
8	TOTALS	2,233,822	3,865,922	3,987,173	3,731,182	3,781,373	3,934,701	4,166,063	25,690,236
9	EXP. REPORTED	4,126,483	4,204,909	3,863,922	3,966,617	4,011,925	3,285,468	4,338,695	27,798,019
10	ADJUSTMENT	(788,490)	(174,839)	53,261	(25,530)	45,736	321,138	(94,872)	(663,596)
11	REMAINING LIABILITY	1,104,171	164,148	(69,989)	209,905	276,288	(328,096)	87,760	\$ 1,444,186.87

B - HCBS PAYMENTS

(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)
←-----QUARTER IN WHICH SERVICE PROVIDED----->									
LINE	QUARTER OF PAYMENT	CURRENT	1ST PRIOR	2ND PRIOR	3RD PRIOR	4TH PRIOR	5TH PRIOR	6TH PRIOR*	TOTAL
1	CURRENT	835,763	1,190,733	77,873	2,295	-	-	-	2,106,665
2	1ST PRIOR		938,833	1,087,332	195,212	11,733	-	-	2,233,109
3	2ND PRIOR			1,101,226	985,781	31,460	5,349	-	2,123,816
4	3RD PRIOR				947,450	919,799	42,388	16,414	1,926,050
5	4TH PRIOR					748,095	893,415	19,821	1,661,331
6	5TH PRIOR						741,663	986,643	1,728,306
7	6TH PRIOR							581,967	581,967
8	TOTALS	835,763	2,129,566	2,266,431	2,130,738	1,711,087	1,682,814	1,604,845	12,361,244
9	EXP. REPORTED	1,850,289	3,237,160	2,742,770	2,394,598	1,536,579	1,125,321	1,774,524	14,661,242
10	ADJUSTMENT	(15,392)	(771,505)	(417,278)	(209,800)	586,727	(224,492)	(24,300)	(1,076,040)
11	REMAINING LIABILITY	999,135	336,089	59,061	54,060	412,219	(781,984)	145,379	\$ 1,223,957.62

C - ACUTE PAYMENTS

(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)
←-----QUARTER IN WHICH SERVICE PROVIDED----->									
LINE	QUARTER OF PAYMENT	CURRENT	1ST PRIOR	2ND PRIOR	3RD PRIOR	4TH PRIOR	5TH PRIOR	6TH PRIOR*	TOTAL
1	CURRENT	534,396	643,445	82,382	23,830	-	-	-	1,284,052
2	1ST PRIOR		768,049	629,037	67,836	32,673	-	-	1,497,595
3	2ND PRIOR			630,638	588,011	88,909	20,915	-	1,328,473
4	3RD PRIOR				639,875	741,937	177,159	9,611	1,568,582
5	4TH PRIOR					511,731	738,225	252,674	1,502,631
6	5TH PRIOR						618,475	803,908	1,422,382
7	6TH PRIOR							701,268	701,268
8	TOTALS	534,396	1,411,494	1,342,057	1,319,552	1,375,251	1,554,774	1,767,461	9,304,984
9	EXP. REPORTED	633,061	1,557,721	1,385,126	1,519,220	824,755	1,076,114	912,918	7,908,916
10	ADJUSTMENT	(56,317)	11,923	273,485	(266,686)	1,227,703	(3,892)	868,168	2,054,383
11	REMAINING LIABILITY	42,348	158,149	316,554	(67,018)	677,207	(482,551)	13,625	\$ 658,314.60

D - OTHER MEDICAL PAYMENTS

(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)
←-----QUARTER IN WHICH SERVICE PROVIDED----->									
LINE	QUARTER OF PAYMENT	CURRENT	1ST PRIOR	2ND PRIOR	3RD PRIOR	4TH PRIOR	5TH PRIOR	6TH PRIOR*	TOTAL
1	CURRENT	2,471	8,150	7,134	6,998	-	-	-	24,753
2	1ST PRIOR		586	2,282	153	-	-	-	3,021
3	2ND PRIOR			715	1,822	963	-	-	3,500
4	3RD PRIOR				400	493	705	155	1,754
5	4TH PRIOR					377	336	746	1,459
6	5TH PRIOR						2,868	5,391	8,259
7	6TH PRIOR							3,496	3,496
8	TOTALS	2,471	8,736	10,130	9,373	1,833	3,909	9,788	46,241
9	EXP. REPORTED	63,790	53,363	54,729	68,145	102,755	30,444	67,177	68,350
10	ADJUSTMENT	10,932	(49,983)	(59,193)	(254,412)	65,265	27,527	(118,298)	(378,162)
11	REMAINING LIABILITY	72,251	(5,356)	(14,594)	(195,640)	166,187	54,062	(60,910)	\$ 16,000.00

*Amounts in the 6th prior column or row include the amounts for the 6th prior period, and any earlier periods.

Program Contractor Cochise Health Systems
Month Ending 06/30/09
Fiscal Year Ending 09/30/09
Utilization Data Report by County (Combined)

ITEM DESCRIPTION	MEDICARE		NON-MEDICARE		TOTAL	
	Current Period	YTD	Current Period	YTD	Current Period	Contract YTD
A. Enrollees (At End of Period)	2,475		325		2,800	
B. Member Months (Unduplicated)	2,477	7,395	320	956	2,797	8,352
Institutional Member Months Total	1,001	2,945	79	225	1,080	3,170
1. Level 1	518	1,511	32	76	550	1,587
2. Level 2	319	942	14	35	332	976
3. Level 3	43	118	20	64	63	182
4. Specialty: Wandering Dementia	63	177	-	3	63	180
5. Specialty: SubAcute Medical	3	14	-	5	3	19
6. Specialty: Behavioral Health	46	125	9	31	55	156
7. Speicality: Respite Care	10	58	4	12	14	70
8. Home and Community Based Services (HCBS) Total	1,457	4,388	238	728	1,694	5,117
a. Adult Foster Care	5	12	3	9	8	21
b. Assisted Living Home	120	325	3	26	123	351
c. Group Home (DD)	11	17	7	11	18	28
d. Individual Home	1,208	3,687	212	643	1,419	4,331
e. Assisted Living Center	103	317	9	26	112	343
f. Other (Specify) Group Home	10	30	4	13	14	43
9. Acute Care	10	32	2	2	12	34
10. Ventilator	5	17	-	-	5	17
11. PPC	16	46	2	3	18	50
12. Other (Specify)	5	13	1	1	6	14
	-	-	-	-	-	-
Admissions	181	514	19	74	200	588
Patient Days	1,323	3,021	136	501	1,459	3,522
Discharges	193	524	19	74	212	598
Discharge Days	1,178	2,886	113	513	1,291	3,399
Average Length of Stay	7.31	5.88	7.16	6.77	14.47	5.99
Emergency Room Visits	184	535	42	132	226	667

FQHC/RHC REASONABLE COST REIMBURSEMENT MEMBER MONTHS

HEALTH PLAN:

Cochise Health Systems

6.1.8

QUARTER ENDING:

6/30/2009

FQHC	Categorical		Categorical Linked Expansion		Federal Non-Categorical Linked Expansion AC/MED	Federal Non-Categorical Linked Conversion AC/MED	ALTCS/ DD	Total
	SOBRA/ AFDC	SSI	SOBRA/ AFDC	SSI				
Chiricahua Community Health Center							136	136
Clinica Adelante, Inc								0
Copper Queen Health Center							281	281
Community Health Center of West Yavapai								0
Community Health Care of Douglas							125	125
Copper Queen Health Center								0
Desert Senita Community Health Center (formerly Ajo Community Health Center)								0
El Rio Health Center								0
Canyonlands Community Health Center								0
Marana Community Health Center								0
Maricopa Integrated Health Systems Clinics								0
Mariposa Community Health Center (Family Health Center)								0
Mountain Park Community Health Center								0
Morenci Health Care Center							17	17
Northern Cochise Community Hospital								0
North Country Community Health Center								0
Sun Life Family Health Center								0
Sunset Community Health Center (formerly Valley Health Center)								0
Superior Clinic (as Cobre Valley Hospital)								0
United Community Health Center								0
Lake Powell Community Health Center								0
Inter-Tribal Health Center								0
Native American Community Health Center								0
Native Americans for Community Action								0
Total Member Months	0	0	0	0	0	0	558	558

Instructions:

Please provide quarterly capitation and/or FFS payments for each FQHC/RHC. Do not report any payments for KidsCare, HIFA or SSDI-TMC members.

Health Plans and Program Contractors will be responsible for maintaining a detailed listing, by month, of members submitted. Listing should include member's name, AHCCCS ID#, primary care physician, FQHC assigned to, rate code and payments. This list may be subject to AHCCCS review.

A current listing of the contracted FQHCs and RHCs can be found on the website at the following link:
http://www.ahcccs.state.az.us/PlansProviders/FQHC_RHC/FQHC_RHC.asp

FQHC/RHC REASONABLE COST REIMBURSEMENT EXPENDITURES PAID

HEALTH PLAN:

Cochise Health Systems

6.1.8A

QUARTER ENDING:

6/30/2009

FQHC	Categorical			Categorical Linked Expansion		Federal Non-Categorical Linked Expansion AC/MED	Federal Non-Categorical Linked Conversion AC/MED	ALTCS/ DD	Total
	SOBRA/	AFDC	SSI	SOBRA/ AFDC	SSI				
Chiricahua Community Health Center								\$ 1,244	\$ 1,244
Clinica Adelante, Inc									\$ -
Copper Queen Health Center									\$ -
Community Health Care of Douglas								\$ 4,565	\$ 4,565
Community Health Center of West Yavapai									\$ -
Copper Queen Health Center								\$ 10,388	\$ 10,388
Desert Senita Community Health Center (formerly Ajo Community Health Center)									\$ -
El Rio Health Center									\$ -
Canyonlands Community Health Center									\$ -
Marana Community Health Center									\$ -
Maricopa Integrated Health Systems Clinics									\$ -
Mariposa Community Health Center (Family Health Center)									\$ -
Morenci Health Care Center								\$ 89	\$ 89
Mountain Park Community Health Center									\$ -
Northern Cochise Community Hospital									\$ -
North Country Community Health Center									\$ -
Sun Life Family Health Center									\$ -
Sunset Community Health Center (formerly Valley Health Center)									\$ -
Superior Clinic (as Cobre Valley Hospital)									\$ -
United Community Health Center									\$ -
Lake Powell Community Health Center									\$ -
Inter-Tribal Health Center									\$ -
Native American Community Health Center									\$ -
Native Americans for Community Action									\$ -
Total Member Months	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 16,285	\$ 16,285

Instructions:

Please provide quarterly capitation and/or FFS payments for each FQHC/RHC. Do not report any payments for KidsCare, HIFA or SSDI-TMC members.

Health Plans and Program Contractors will be responsible for maintaining a detailed listing, by month, of members submitted. Listing should include member's name, AHCCCS ID#, primary care physician, FQHC assigned to, rate code and payments. This list may be subject to AHCCCS review.

A current listing of the contracted FQHCs and RHCs can be found on the website at the following link:

http://www.ahcccs.state.az.us/PlansProviders/FQHC_RHC/FQHC_RHC.asp

LISTING OF PLAN OFFICERS AND DIRECTORS

STATEMENT AS OF JUNE 30, 2009 OF COCHISE HEALTH SYSTEMS

<u>Name, Title</u>	<u>Other Relationship to Plan</u>	<u>Type of Compensation (if applicable)</u>
Mary Gomez, Director	None	Salary
Dr. Rhema Sayers, M.D., Medical Director	None	Salary, as used
Richard Searle, Cochise County Board of Supervisors	None	None
Pat Call, Cochise County Board of Supervisors	None	None
Ann English, Cochise County Board of Supervisors	None	None

Note: Type of compensation may include, but is not limited to, salary, contract, director's fees, bonuses, etc.